FP-1139 US

## BIRCH, STEWART, KOLASCH & BIRCH, LLP

P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050 ATTORNEY DOCKET NO. 0378-0400P

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

Page 1 of 2

## COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I

D 1-60	(Application Number)	(Filing Date)	(Status - patented,	pending, abandoned)			
Application(s):	(Application Number)	(Filing Date)	. (Status - patented,	pending, abandoned)			
Insert Prior U.S.	I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:						
Application(s): (if any)  Insert Requested Information: (if appropriate)	Country	Ap	plication Number Date o	f Filing (Month / Day / Year)			
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed more than 12 months (6 months for designs) Prior to the Filing Date of this Application:						
	(Application Number)			(Filing Date)			
	(Application Number)			(Filing Date)			
(if appropriate)  Insert Provisional	I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below.						
	(Number)	(Country)	(Month / Day / Year Filed)	Yes No			
	(Number)	(Country)	(Month / Day / Year Filed)	Yes No			
	(Number)	(Country)	(Month / Day / Year Filed)	Yes No			
	(Number)	(Country)	(Month / Day / Year Filed)	Yes No			
Insert Priority Information:	Prior Foreign Application(s) 2002–228562	Japan	August 6, 2002	Priority Claimed			
	I hereby claim foreign priority benefits under Title 35, United States Code, §119 (a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:						
	81 56	re same was ever known or a printed publication in any co- is not in public use or on sale een patented or made the s United States of America on designs) prior to this appli- country foreign to the Unite	e in the United States of America more ubject of an inventor's certificate issue an application filed by me or my legal cation, and that no application for pates	efore my or our invention cof or more than one year than one year prior to this and before the date of this representatives or assigns and or inventor's certificate			
•	I hereby state that I have reviewed an		the above identified specification, includi				
For Use Without Specification Attached:	International Application Numb amended on	er	; and was (if applicable)				
	the specification was filed on		as PCT; and was				
	and amended on( if applicable); and/or						
Fill in Appropriate Information -	United States Application Num			;			
	the specification of which is attached heret the specification was filed on	o. If not attached hereto,		as			
Insert Title:	APPARATUS FOR COMPENSATING FOR SHADING ON A PICTURE PICKED UP BY A SOLID-STATIMAGE SENSOR OVER A BROAD DYNAMIC RANGE						
	verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:						

## Attorney Docket 0378-0400P

I hereby appoint the practitioners at CUSTOMER NO. 2292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

PLEASE NOTE:

BIRCH, STEWART, KOLASCH & BIRCH, LLP or CUSTOMER NO. 2292 P.O. Box 747 • Falls Church, Virginia 22040-0747

Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

YOU MUST COMPLETE THE FOLLOWING:			•			
Full Name of First or Sole Inventor: Insert Name of Inventor Insert Date This	GIVEN NAME Naoki KU	FAMILY NAME BO	INVENTOR'S SIGNATURE	<del>) .</del>	DATE* July 9, 2003	
Document is Signed . Insert Residence Insert Citizenship	Residence (City, State & Country)  Asaka-shi, Saitama, Japan			CITIZENSHIP  Japanese		
Insert Mailing Address	MAILING ADDRESS (Complete Street Address including City, State & Country)  c/o Fuji Photo Film Co., Ltd., 11-46, Senzui 3-chome, Asaka-shi, Saitama, Japan					
Full Name of Second Inventor, if any:	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE	,	DATE*	
see above	Residence (City, State & Country) -CITIZENSHIP					
	MAILING ADDRESS (Complete Street Address including City, State & Country)					
Full Name of Third Inventor, if any	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*	
see above	Residence (City, State & Country)			CITIZENSHIP		
	MAILING ADDRESS (Complete Street Address including City, State & Country)					
Full Name of Fourth Inventor, if any	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*	
see above	Residence (City, State & Country)			CITIZENSHIP		
	MAILING ADDRESS (Complete Street Address including City, State & Country)					
Full Name of Fifth Inventor, if any	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*	
see above	Residence (City, State & Country) CITIZENSHIP					
Page 2 of 2	MAILING ADDRESS (Complete Street Address including City, State & Country)					
Page 2 of 2 (Revised 01/02)	• DATE OF SIGNATURE					